



City Of Baltimore  
DEPARTMENT OF RECREATION AND PARKS  
Permit Office - 3001 East Drive  
Baltimore Maryland 2121  
Permit Office 410.396.7070



2013

**INNER HARBOR PARK-SPECIAL EVENT APPLICATION**

All events, public or private, up to 2,500 people under the jurisdiction of the Baltimore City Department of Recreation and Parks. **Application must be submitted to the Permits Office at least 75 days prior to the proposed date(s) of event. A minimum late fee of \$100 will be assessed for applications not received within this time line.**

**Non-Refundable Application Fee: \$75**

**Area Impact Fees: Varies By Park Location**

**Security Deposit Requirement: Varies By Event Set Up and Location**

**Additional Fees, Permits, and Insurance may be required.**

**Payable by Certified Check or Money Order Only**

**No applications will be processed without the receipt of the application fee.**

1. Nonprofit Organization applying for Inner Harbor Special Event Permit:

ORGANIZATION: \_\_\_\_\_

TELEPHONE: ( ) \_\_\_\_\_ FAX ( ) \_\_\_\_\_

ADDRESS: \_\_\_\_\_

Street City State Zip Code

Email Address: \_\_\_\_\_ Website: \_\_\_\_\_

2. Person responsible for conducting the special event, solicitation or public assembly:

NAME (AND TITLE): \_\_\_\_\_

TELEPHONE: ( ) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

Street City State Zip Code

Cell Phone for event coordinator on site during event: \_\_\_\_\_

3. Name of event? \_\_\_\_\_

4. Type of Event (PLEASE CHECK AS MANY AS APPLICABLE BELOW):

☐ Assembly (Public) ☐ Entertainment ☐ Parade (\*) ☐ Solicitation (Donations)  
☐ Concert ☐ Environmental ☐ Race (Foot) (\*) ☐ Solicitation (Petition)  
☐ Educational ☐ Leafleting ☐ Rally ☐ Walk-A-Thon (\*)

OTHER (Please describe): \_\_\_\_\_

**(\*) NOTICE: PARADES/RACES/WALK-A-THONS — A COPY OF YOUR PROPOSED ROUTE AND/OR MAP, INCLUDING ASSEMBLY AND DISBANDING AREA MUST BE ATTACHED TO THIS APPLICATION. ALSO, PLEASE CONTACT THE DGS SPECIAL EVENTS OFFICE (410)396-1916 TO APPLY FOR A PERMIT IF A ROAD CLOSURE IS NEEDED.**

5. What is the purpose of the event? (please explain, or attach a copy of your agenda or planned activities)

\_\_\_\_\_

6. Requested Date(s) and Times(s) for this event are as follows (please fill in below): **NOTICE: NO RAIN DATES. NOT MORE THAN FIVE (5) EVENT DATES (CONSECUTIVE OR NON CONSECUTIVE) PER APPLICATION OR LOCATION.**

EVENT ACTIVITIES	STARTING DATE(S)	ENDING DATE(S)	STARTING TIME	ENDING TIME
SET UP DATE(S)				
ACTUAL EVENT DATE(S)				
TAKE DOWN DATE(S)				

7. Please check the Inner Harbor Park LOCATION(s) requested for this event:

\_\_\_ McKeldin Square \_\_\_ Kaufman Pavilion \_\_\_ Rash Field \_\_\_ West Shore Park \_\_\_ Pier 5 \_\_\_ Broadway Pier

\_\_\_ Broadway Market Square \_\_\_ Inner Harbor Promenade \_\_\_ Canton Waterfront \_\_\_ Harris Creek Park

**NOTICE: THE FOLLOWING INNER HARBOR PARK LOCATIONS ARE FOR EVENTS SPONSORED BY THE CITY OF BALTIMORE ONLY**

\_\_\_ Amphitheater & Steps \_\_\_ Bicentennial Plaza \_\_\_ Ceremonial Steps \_\_\_ Constellation Pier

8. How many participants (i.e., volunteers, walkers, etc.) and spectators are anticipated daily? \_\_\_\_\_
9. Is this a first time event for you or the sponsoring organization at this location? \_\_\_\_\_ YES \_\_\_\_\_ NO
- a. If NO, how does this event differ from previous years? \_\_\_\_\_
- b. Attendance totals for last event: \_\_\_\_\_ DAILY TOTAL \_\_\_\_\_ OVERALL TOTAL
10. How do you plan to publicize this proposed event? (If available, please attach a copy of publicity plan or flyer.) \_\_\_\_\_
11. Will any signs, banners, or flyers be hung or posted (other than on stages or booths)? \_\_\_\_\_ YES \_\_\_\_\_ NO  
***NOTICE: IT IS A VIOLATION OF THE DEPARTMENT OF RECREATION & PARKS' RULES AND REGULATIONS TO POST OR HANG IN ANY MANNER, DIRECTIONAL MARKERS, NOTICES, OR BANNERS TO ANY TREE OR LAMP POST.***
12. Please describe the proposed location(s) of the signs, banners, etc. (attach a site plan if available): \_\_\_\_\_
13. Will any public street(s) need to be partially closed or blocked off in conjunction with this event? \_\_\_\_\_ YES \_\_\_\_\_ NO  
***NOTICE: IF YES, THE APPLICANT MUST OBTAIN A SPECIAL EVENT PERMIT FROM THE DEPARTMENT OF GENERAL SERVICES, SPECIAL EVENT OFFICE, (410)396-1916, MUNICIPAL BLDG., 200 N. HOLLIDAY ST., LOBBY, BALTIMORE MD 21202.***
14. Do you plan to erect temporary structures, such as STAGES, BOOTHS, TABLES, TENTS, DISPLAYS, ETC., for this event?
- NOTICE: THE DEPARTMENT OF RECREATION AND PARKS DOES NOT PROVIDE EQUIPMENT. THE APPLICANT IS RESPONSIBLE FOR SECURING ALL EQUIPMENT AND/OR OTHER CITY SERVICES: TO REQUEST USE OF CITY EQUIPMENT, YOU MUST CONTACT THE DEPT. OF GENERAL SERVICES (DGS), SPECIAL EVENT OFFICE, (410-396-1916), 200 N. HOLLIDAY STREET, LOBBY, AT LEAST EIGHT (8) WEEKS PRIOR TO YOUR EVENT.***
- a. If YES, please describe below including size(s), how many, capacity, etc. A site plan and/or drawing must be included with this application showing the location of all items.  
STAGES: \_\_\_\_\_  
BOOTHS/TABLES: \_\_\_\_\_  
DISPLAYS: \_\_\_\_\_  
TENTS: \_\_\_\_\_  
OTHER EQUIPMENT: \_\_\_\_\_
- b. If tent(s) will be erected, list the name of tent company, address, telephone number and the contact person's name:  
NAME OF TENT COMPANY: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CONTACT PERSON: \_\_\_\_\_ TELEPHONE ( \_\_\_\_\_ )  
***NOTICE: PLEASE CONTACT THE DEPT. OF HOUSING & COMMUNITY DEVELOPMENT, BUILDING INSPECTIONS (410)396-3470, AND THE BCFD FIRE PREVENTION BUREAU (396-4058) TO APPLY FOR ADDITIONAL PERMITS.***
15. Will any type of sound amplifying equipment or devices be used in conjunction with this event? \_\_\_ YES \_\_\_ NO  
If YES, please list the type of equipment: \_\_\_\_\_  
***NOTICE: IF SOUND AMPLIFICATION DEVICES, EQUIPMENT, DRUM(S), ETC., ARE USED DURING AN EVENT, ALL AMPLIFIED SOUND MUST CEASE BY 9:00 P.M., EXCEPTION: CITY OF BALTIMORE SPONSORED "SPECIAL EVENT". AMPLIFIED SOUND AND/OR MUSIC MUST NOT INTERFERE WITH OTHER INNER HARBOR ACTIVITIES OR DISRUPT THE OPERATION OF BUSINESSES IN THE AREA.***

16. Do you plan to provide musical entertainment for this event? \_\_\_\_\_ YES \_\_\_\_\_ NO  
If YES, please describe below (i.e., Big Band, Reggae Band, Singer, etc.): \_\_\_\_\_  
**NOTICE: A copy of the entertainment lineup and time line must be submitted to the Dept. of Rec. & Parks**
17. Do you plan to provide other entertainment for this event? \_\_\_\_\_ YES \_\_\_\_\_ NO  
If YES, please describe below, or attach a copy of your planned program: \_\_\_\_\_

18. Do you plan to have animals on site during this event? \_\_\_\_\_ YES \_\_\_\_\_ NO  
If YES, please list how many, the type of each animal; what provisions have been made for the care, containment, and waste removal of these animals? Please give a contact person's name and phone number below: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_ DAYTIME PHONE: ( \_\_\_\_\_ ) \_\_\_\_\_

**NOTICE: PONY RIDES ARE NOT PERMITTED IN PARKS/PLAZAS UNDER THE JURISDICTION OF CITY OF BALTIMORE DEPARTMENT OF RECREATION AND PARKS.**

19. Are you planning to have any amusement or mechanical rides, or amusement devices (i.e. moonbounce, etc.)? \_\_\_\_\_ YES \_\_\_\_\_ NO If yes, please explain in detail and provide the name, address, telephone number and contact person for the vendor: \_\_\_\_\_

Name of Company: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Telephone: \_\_\_\_\_

**NOTICE: Any festival with amusement/mechanical rides, or with children's amusement devices will be required to provide proof of liability insurance, naming the Mayor, the City Council, the Department of Recreation and Parks, and employees of the City of Baltimore as additional insured. This document must be submitted to the BCDRP Permits Office at least one (1) month prior to the proposed festival, NO EXCEPTIONS. The certificate of insurance must have the following wording included in the description box: "The Mayor and City Council of Baltimore City, the Department of Recreation and Parks, the Department of Public Works, and Employees of the City of Baltimore are named as additional insured for (insert name of festival) on (list festival dates, including starting set up date through ending take down date) to be held at (insert festival location). NOTE: YOUR PERSONAL OR ORGANIZATIONAL HOMEOWNERS OR RENTERS INSURANCE WILL NOT COVER THIS!!"**

20. Are you providing a generator as a power source? \_\_\_\_\_ YES \_\_\_\_\_ NO  
If YES, How many? \_\_\_\_\_ please describe: \_\_\_\_\_  
\_\_\_\_\_ (provide how many and KW)

21. Are you requesting the use of electricity? \_\_\_\_\_ YES \_\_\_\_\_ NO  
**A FEE MAY BE ASSESSED FOR THIS SERVICE.**  
If YES, please list operational needs: \_\_\_\_\_

22. Is a power source available at the proposed location? \_\_\_\_\_ YES \_\_\_\_\_ NO  
If YES, is access available or will it have to be turned on (please explain): \_\_\_\_\_

23. Will electrical wiring need to be installed? \_\_\_\_\_ YES \_\_\_\_\_ NO  
**NOTICE: IF YES, YOU MUST CONTACT THE DEPARTMENT OF GENERAL SERVICES, SPECIAL EVENT OFFICE (410)396-1916, AND PROVIDE A SITE PLAN LISTING ELECTRICAL NEEDS AT LEAST EIGHT (8) WEEKS PRIOR TO YOUR PROPOSED EVENT DATE(S)**

24. Is this event open to the public? \_\_\_\_\_ YES \_\_\_\_\_ NO

25. Will donations/contributions be accepted or solicited during this event? \_\_\_\_\_ YES \_\_\_\_\_ NO  
**If this event will generate proceeds, funds or donations, YOU MUST INCLUDE PROOF OF YOUR ORGANIZATIONS**

**NON-PROFIT STATUS with this application. (I.E., Tax-Exempt Recognition from the Internal Revenue Service; Maryland State Department of Assessments and Taxation)**

a. If YES, please explain how these donations will be generated or solicited: \_\_\_\_\_

b. List all parties who will receive the proceeds from the donations or contributions: \_\_\_\_\_

26. Will a registration, membership, or admission fee be required in order to attend or participate in the event activities? \_\_\_\_\_ YES \_\_\_\_\_ NO

If YES, please explain the type of fee, amount and purpose of the fee: \_\_\_\_\_

27. Do you plan to have Money/Prize Wheels, Raffle, Bingo, etc., on site, in conjunction \_\_\_\_\_ YES \_\_\_\_\_ NO  
If YES, list the type of activity and the licensee for each type? \_\_\_\_\_

**NOTICE: A PERMIT IS REQUIRED BY LAW. PLEASE CONTACT THE BALTIMORE CITY POLICE DEPARTMENT ON (410)396-2130, LEAST 6 WEEKS PRIOR TO YOUR EVENT DATE.**

28. Do you plan to SELL, DISTRIBUTE, OR GIVE A WAY refreshments, and/or merchandise in conjunction with this event? \_\_\_\_\_ YES (SELLING) \_\_\_\_\_ YES (GIVE-A-WAY) \_\_\_\_\_ NO

If Yes, please explain \_\_\_\_\_

**NOTICE: A FOOD PERMIT MAY BE REQUIRED IF FOOD/ REFRESHMENTS ARE SERVED IN CONJUNCTION WITH AN EVENT. PLEASE CONTACT THE BALTIMORE CITY HEALTH DEPARTMENT, FOOD PERMIT DESK (410)396-4544.**

a. IF YES, how many merchandise booths/tables will be set-up? \_\_\_\_\_

b. If YES, how may food booths/tables will be set-up? \_\_\_\_\_

**NOTICE: A list of your food and merchandise vendors with contact information is required**

*Disposal of oil and grease onto "CITY" property is prohibited. Grease/oil must be kept and disposed off in a proper manner.*

*NOTE: applicant/organization will bear total liability for any damage caused by improper grease/oil dumping.*

*State sales tax must be collected for all food/merchandise sold at public events. Please contact the State of Maryland Comptroller's Office for more information. All vendors are required by law to have proper licenses and/or permits displayed on site during the date(s) of the festival. Failure to produce or display proper permits and/or licenses upon request will result in the immediate suspension/closure of activity/vendor.*

29. Will gas grills or propane stoves, etc., be used during this event? \_\_\_\_\_ YES \_\_\_\_\_ NO

**NOTICE: THE APPLICANT/PERMITTEE MUST PROVIDE APPROPRIATE SAFETY EQUIPMENT (K-TYPE FIRE EXTINGUISHERS, ETC.). OPEN BURNING AND/OR GROUND FIRES ARE PROHIBITED.**

30. Do you plan to SERVE OR SELL beer or light wine during this event? \_\_\_\_\_ YES \_\_\_\_\_ NO

\*\*If yes, please explain: \_\_\_\_\_

**\*NOTICE: A LIQUOR LICENSE IS REQUIRED. CONTACT THE LIQUOR LICENSE COMMISSIONER'S OFFICE (410)396-4377.**

**\*\*If you are planning to serve or sell beer or light wine during your event, the Department of Recreation & Parks requires that the organization/individual secure on-duty Baltimore City police officers through BCPD, Special Events / Overtime Unit (410)396-2597. The recommended number of officers needed for your event will be determined by the information provided in this application.**

**The sale and consumption of beer and/or light wine during the operational hours of the special event, must be in a contained area (i.e. beer garden)**

31. Are you providing port-a-johns for your event? \_\_\_\_\_ YES \_\_\_\_\_ NO

**NOTICE: THIS SERVICE IS NOT PROVIDED BY THE CITY OF BALTIMORE. Companies providing this service can be found in the yellow pages under Toilets-Portable.**

*The Department of Recreation and Parks requires one (1) portable toilet for every 125 people in attendance when food and beverages will be available at the festival. When no food or beverages are available at the festival, then there must be one (1) portable toilet for every*

250 people. Portable toilets must be fully accessible to persons with disabilities, in compliance with the Americans with Disabilities Act (ADA).

- a. If YES, how many? \_\_\_\_\_ (regular units) \_\_\_\_\_ (handicap accessible units)
- b. Please provide name and telephone number of company providing units: \_\_\_\_\_
- c. Set up date of units: \_\_\_\_\_ Removal date of units from site: \_\_\_\_\_

d. Please indicate where units will be placed and include a site plan: \_\_\_\_\_

32. Please describe how do you plan to remove refuse and garbage from the event site, and list the Clean up Committee Chairperson's contact information: \_\_\_\_\_  
NAME: \_\_\_\_\_  
DAYTIME PHONE: ( ) \_\_\_\_\_

33. Do you require additional trash receptacles, dumpster(s), or load packer(s) for this event? \_\_\_\_\_ YES \_\_\_\_\_ NO  
*NOTICE: ADDITIONAL FEES ARE CHARGED BY THE BUREAU OF SOLID WASTE, WHEN EXTRA TRASH RECEPTACLES, DUMPSTER(S) or LOAD PACKER(S) ARE PROVIDED FOR SPECIAL EVENTS.*

a. If YES, please list how many on the appropriate line below:  
\_\_\_\_\_ TRASH RECEPTACLES \_\_\_\_\_ DUMPSTER(S) \_\_\_\_\_ LOAD  
PACKER(S)

- b. Where exactly at the event site should the above items be delivered? (Attach a site plan if special placement is requested) \_\_\_\_\_

34. What are your plans for providing parking for the staff, entertainers, vendors & public participating/attending your event? (Include in site plan) **if you are using a private property for parking, a signed contract with the property owner must be submitted with your application.** \_\_\_\_\_  
\_\_\_\_\_

35. Will you be promoting public transportation access to your event? YES NO Do you need information about Public Transportation?

What are your plans for providing security, traffic and/or crowd control? Please list contact person, phone number, and the name and address of security firm.

**CONTACT PERSON:** \_\_\_\_\_  
**PHONE:** ( ) \_\_\_\_\_  
**NAME OF SECURITY FIRM:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_  
*NOTICE: A copy of security company's bonding and insurance is required in addition to the security plan (number and time of security personnel) being provided during the operational hours of the special event*

37. What are your plans for providing emergency medical/services? \_\_\_\_\_

Name(s): \_\_\_\_\_ Certificate Number(s): \_\_\_\_\_

38. Are there any special provisions pertaining to your event which has not been addressed on this application? \_\_\_\_\_  
\_\_\_\_\_

**Submitting this Special Event Application is not a confirmation to conduct your planned event. If the date and/or location requested is not available or if the location requested is not an approved site to conduct your proposed event, you will be contacted by the Department and alternate arrangements will be suggested or made. Your confirmation will be in the form of a PERMIT, issued to the Organization and/or person responsible for conducting the event. Please DO NOT SEND OUT EVENT NOTICES, PUBLICITY, FLYERS, ETC., prior to receiving this confirmation.**

**By signing and submitting this application, you and/or the sponsoring organization(s) agree to abide by the rules and regulations of the Department of Recreation and Parks, especially those rules and regulations pertaining to permits.**

All fees, agency reimbursement costs (i.e., security, traffic control, electric, clean up, etc.), security deposits, and/or additional documents (i.e., Site Plan(s), proof of Liability Insurance, Nonprofit Status, etc., if required), must be paid and/or received by the permit office before your permit is issued. Please place a check mark (✓) next to all items included and/or attached to this application:

<input type="checkbox"/> APPLICATION FEE(\$75.00)	<input type="checkbox"/> EVENT SITE PLAN
<input type="checkbox"/> ADDITIONAL EVENT INFORMATION	<input type="checkbox"/> PROOF OF NON-PROFIT STATUS
<input type="checkbox"/> REFUNDABLE SECURITY DEPOSIT (\$1,000 PER DAY)	<input type="checkbox"/> AREA IMPACT/PAVILION
<input type="checkbox"/> LIABILITY INSURANCE (\$1,000,000)	<input type="checkbox"/> OTHER

PLEASE NOTE: When liability insurance is required, a copy of the certificate of Insurance must be submitted to the Permit Office ONE (1) MONTH PRIOR TO THE PROPOSED EVENT. The certificate of insurance MUST HAVE THE FOLLOWING WORDING included in the description box:

"The Mayor and City Council of Baltimore City, the Departments of Recreation & Parks, Public Works, Transportation, General Services and Employees of the City of Baltimore are named as additional insured for (INSERT NAME OF EVENT) on (LIST EVENT DATES, INCLUDING STARTING SET UP DATE THROUGH ENDING TAKE DOWN DATE) to be held at (INSERT EVENT LOCATION)."

THE DEPARTMENT CAN NOT ACCEPT PERSONAL CHECKS or CASH. Payment of fee(s) must be in the form of a Cashiers Check, or Money Order ONLY! Payable to the Director of Finance, Baltimore City

Permits will only be issued to persons 21 years of age or older with a photo ID, and permits are non-transferable.

PLEASE SIGN AND DATE (BELOW) BEFORE RETURNING THIS APPLICATION

_____	_____
Applicant's Signature	(Date)
_____	
Please Print Applicants Name Here	

Return this application, and the items you have checked above to:  
**BALTIMORE CITY DEPARTMENT OF RECREATION AND PARKS**  
Permit Office - 3001 East Drive  
Baltimore Maryland 21217

**EVENT CANCELLATION/REFUND POLICY: NOTIFICATION OF CANCELLATION MUST BE RECEIVED IN WRITING AT LEAST 30 BUSINESS DAYS PRIOR TO THE PROPOSED EVENT DATE(S) FOR CONSIDERATION OF AREA IMPACT FEE REFUNDS. WRITTEN NOTIFICATION WILL BE ACCEPTED IN PERSON, BY US MAIL, E-MAIL TO [PARKPERMITS@BALTIMORECITY.GOV](mailto:PARKPERMITS@BALTIMORECITY.GOV)**

ADDENDUM TO APPLICATION

FOR PERMIT

(Must be signed and attached to all applications)

**AS A CONDITION OF YOUR PERMIT**  
**PLEASE READ, SIGN, AND DATE**  
**THE FOLLOWING STATEMENT:**

As the contact and/or person responsible for conducting an event on property under the jurisdiction of the City of Baltimore Department of Recreation and Parks, I agree to **END/STOP** all amplified sound and/or music (whether live or recorded) **AT 9:00 P.M.**

I also agree that during my event/activity, amplified sound and/or music must be maintained at a reasonable level so as not to disturb, interfere, or compete with other park activities, or impact on surrounding businesses or neighborhood(s).

Whereas I also agree that during my event/activity, there will be no heavy equipment and/or vehicle on any grass or lawn areas. Parking is **PERMITTED ON PAVED ROADS ONLY**, in parks which are open to vehicular traffic. Please keep in mind that police will ticket vehicles parked on the grass, or when parked on roads posted with "NO PARKING" signs, and in parks posted "OFFICIAL VEHICLES ONLY".

I also agree by signing and dating this form that I have received and will review the copy of Rules and Regulations of the City of Baltimore, Department of Recreation and Parks. I have also been informed that the Baltimore City Police Department and Park Rangers will also enforce the Rules and Regulations.

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(Signature and Date)

(FOR OFFICE USE ONLY)

Application Fee\_\_\_ Yes \_\_\_ NoCheck # \_\_\_\_\_MO# \_\_\_\_\_Receipt# \_\_\_\_\_

Pavilion Fee\_\_\_ Yes \_\_\_ NoCheck # \_\_\_\_\_MO# \_\_\_\_\_Receipt# \_\_\_\_\_

Electric Fee\_\_\_ Yes \_\_\_ NoCheck # \_\_\_\_\_MO# \_\_\_\_\_Receipt# \_\_\_\_\_

Other Fees\_\_\_ Yes \_\_\_ NoCheck # \_\_\_\_\_MO# \_\_\_\_\_Receipt# \_\_\_\_\_

EXPLANATION OF OTHER FEES: \_\_\_\_\_

D.P.O. # \_\_\_\_\_Series # \_\_\_\_\_Date \_\_\_\_\_Amt \_\_\_\_\_

**NOTIFICATION AND/OR CONTACT WITH APPLICANT**

List dates/time, reason, how contacted (phone/mail), and name of person initiating contact. If the contact was made by telephone and a message was left for the applicant, list the name of the person the message was left with. If notification was sent by mail, attach a copy of the correspondence

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